



FUNDRAISER APPLICATION

MACOMB MSUE 4-H YOUTH DEVELOPMENT PROGRAM

This form is due at the 4-H Office at least two weeks prior to the beginning of the fundraiser. This allows time for staff to review your proposal and communicate with you if any clarification or additional information is needed. You will receive notification of the approval of your fundraiser and the date by which a fundraiser report is due to the 4-H Office.

Club/Program Name: _____ Location of Fundraiser: _____

Person(s) responsible: _____ Date(s) of Fundraiser: _____

Phone: (____) _____

____ Send me a hard copy of report form
____ I will download report form when I need it.

Provide a brief explanation of the fundraising activity you are planning.

Explain how all items necessary for the fundraiser will be obtained and list estimated expenses connected with these items. Any expense occurred by an individual or group who expects to be reimbursed once the fundraiser is completed must be listed here as an expense.

List the total revenue expected from the fundraiser and explain how you have arrived at this figure.

List the amount of the expected net proceeds (total revenue minus costs) and explain how you have arrived at this figure if it is not obvious from information already provided above.

Explain how the proceeds will be used. Mention specific projects or activities that will benefit and specific purchases that will be made from the proceeds.

Club/Program leader signature: _____ Date: _____

4-H Agent/Extension Director signature: _____ Date: _____

Follow up report is due on: _____ Received by: _____ Date: _____